

PART B - FEE(S) TRANSMITTAL

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75074 7390 10/29/2010

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(Depositor's name)

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(Date)

| APPLICATION NO. | FILED DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|------------|---------------------------|---------------------|------------------|
| 10/568,053 | 06/18/2008 | Graham Charles Bloomfield | PR4-33330A | 3708 |

TITLE OF INVENTION: 5-PHENYL-4-METHYL-TIAZOL-2-YL-AMINE DERIVATIVES AS INHIBITORS OF PHOSPHATIDYLIN OSITOL 3 KINASE ENZYMES (PI3K) FOR TREATMENT OF INFLAMMATORY DISEASES

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|---------------|---------------------|----------------------|------------------|------------|
| nonprovisional | NO | \$1510 | \$300 | \$0 | \$1810 | 01/31/2011 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|-----------------------|----------|----------------|
| STOCKTON, LAURA LYNNE | 1626 | 548-196000 |

| | |
|---|---|
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |
| <input checked="" type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | 1. <u>Mark Milstead</u> 2. <u>Michael Smith</u> 3. _____ |

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Novartis AG

Basel Switzerland

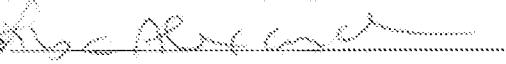
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

| | |
|--|--|
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature 
 Typed or printed name Lisa E. Alexander

Date January 27, 2011
 Registration No. 41,576

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